



PATENT
ATTORNEY DOCKET NO.: 051252-5201
Application No.: 09/442,977

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:)
Dr. Martin MASS)
Serial No.: 09/442,977) Group Art Unit: 3747
Filed: 18 November 1999) Examiner: C. Miller
For: High Pressure Fuel Pump Delivery)
Control by Piston Deactivation)

Commissioner of Patents and Trademarks
Washington, D.C. 20231

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TECHNOLOGY CENTER R3700

AMENDMENT TRANSMITTAL FORM

1. Transmitted herewith is an Amendment responding to the Office Action mailed **October 11, 2001**.
2. Additional papers enclosed.

Drawings: Formal Informal (Corrections)
 Information Disclosure Statement
 Form PTO-1449, ___ references included
 Citations
 Declaration of Biological Deposit
 Submission of "Sequence Listing", computer readable copy and/or amendment pertaining thereto for biotechnology invention containing nucleotide and/or amino acid sequence.

3. **EXTENSION OF TIME**

The proceedings herein are for a patent application and the provisions of 37 CFR 1.136(a) apply.

Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition and fee for extension of time.

Applicant petitions for an extension of time, the fees for which are set out in 37 CFR 1.17(a)-(d), for the total number of months checked below:

<u>Total months requested</u>	<u>Fee for extension</u>	<u>[fee for Small Entity]</u>
[] one month	\$ 110.00	\$ 55.00
[] two months	\$ 400.00	\$200.00
[] three months	\$ 920.00	\$460.00
[] four months	\$1,440.00	\$720.00

Extension of time fee due with this request: **\$0.00**

If an additional extension of time is required, please consider this a Petition therefor.

An extension for ___ months has already been secured and the fee paid therefor of \$____ is deducted from the total fee due for the total months of extension now requested.

3. Fee Calculation

CLAIMS AS AMENDED						
	Claims Remaining After Amendment		Highest No. Previously Paid	Present Extra	at Rate of	Total Fees
Total Claims	39	minus	42	2	x \$18.00 each=	+ \$0.00
Independent Claims	7	minus	5	2	x \$84.00 each=	+ \$168.00
[] First presentation of Multiple dependent claim(s)					\$280.00	+ \$
SUB-TOTAL =						\$168.00
Reduction by 1/2 for filing by a small entity						- \$
TOTAL FEE =						\$168.00

4. Fee Payment

[] No fee is to be paid at this time.

Please charge the **Deposit Account No. No. 50-0310** in the amount of **\$168.00** for additional claims.

The Commissioner is hereby authorized to charge any fees including fees due under 37 CFR §1.16 and §1.17 which may be required, or credit any overpayment to Deposit Account No. 50-0310.

Respectfully submitted,
MORGAN, LEWIS & BOCKIUS

Dated: **January 11, 2002**
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